

**Certification of Existing Subsurface Sewage Disposal
And Water Supply Facilities For A Single Family Residence**

A. Property Information

- 1) Address of Residence: Street _____
Hamlet _____ Zip _____
- 2) Tax Map Number: District _____ Section _____ Block _____ Lot(s) _____
- 3) Owner's Name _____ Phone _____
- 4) Client's Name (if different than owner) _____
- 5) Proposed changes in use (e.g., addition of apartment, bedrooms, office, etc.) _____

B. Sanitary System Evaluation:

**** Sanitary System(s) must be pumped out and physically examined by the certifying design professional.**

- 1) Type of Water Supply: ☐ Public Water
☐ Private Well – Provide copy of water analysis dated within one calendar year
- 2) Date of sanitary system pumping _____ total gallons removed _____
- 3) Materials of construction of sanitary system ☐ Precast ☐ Block*
***NOTE:** Block pools are no longer accepted – sanitary system must be replaced
- 4) Size of Sanitary components*: Septic tank _____ gallons
_____ diameter, or dimensions if rectangular
_____ effective depth
Leaching Pools _____ diameter
_____ effective depth
_____ total number of pools

***NOTE:** Sanitary components must meet current standards for proposed use or upgrading will be required.

- 5) Overall condition of sanitary components: ☐ acceptable ☐ unacceptable
(waste lines, drop tees, baffle walls, covers, septic tank, leaching pools)

**Certification: The results and recommendations found in this
report are based upon my evaluation and inspection of the
above referenced property and pumped out sanitary system:**

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ON PAGE 2

Name of Architect/Engineer _____ License Number _____
Signature _____ Date _____ Phone _____
Mailing Address: _____
Hamlet _____ State _____ Zip _____

C. Recommendations And Results (Check applicable items):

1. Sewage System

- a. _____ System(s) functioned properly at time of inspection and is adequate for the proposed use.
- b. _____ System(s) is not adequate for the proposed use (explain and make recommendations in Section D below or attach a separate report).
- c. _____ Other _____

2. Water Supply

- a. _____ Water supply is adequate for proposed use (if private well, attach water analysis dated within one calendar year).
- b. _____ Water supply is not adequate for proposed use (explain and make recommendations in Section D below or attach a separate report).
- c. _____ Other _____

D. Other Comments/Recommendations: _____

AFFIX DESIGN PROFESSIONAL'S SEAL HERE

Disclaimer: This inspection report indicates the present condition of the private on-site subsurface sewage disposal system and water supply based on recommended inspection procedures. The results of this inspection do not guarantee or warranty future performance. The recipient of this report should discuss any deficiencies found by this inspection with the individual who prepared the report.